## Application Data Sheet

Application Information

Application Type:: Regular Subject Matter:: Utility

Suggested Classification::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Suggested Group Art Unit::

Sequence Submission?:: None
Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: RING CRYSTALLIZER METHOD AND

APPARATUS

Attorney Docket Number:: 2001-1289

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 6
Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: THE NETHERLANDS

Status:: Full Capacity

Given Name:: RENE-JEROEN

Middle Name::

Family Name:: VERSCHUUR

City of Residence:: 'S-HERTOGENBOSCH

State or Province of

Residence::

Country of Residence:: THE NETHERLANDS

Street of Mailing Address:: BUURSCHAPPENLAAN 150

City of Mailing Address:: 'S-HERTOGENBOSCH

State or Province of Mailing Address::

Country of Mailing Address:: THE NETHERLANDS

Postal or Zip Code of Mailing Address:: NL-5235 EK

Applicant Authority Type:: Inventor

Primary Citizenship Country:: GERMANY

Status:: Full Capacity

Given Name:: REINHARD UWE

Middle Name::

Family Name:: SCHOLZ

KERKEN

City of Residence:: KERF

State or Province of

Residence::

Country of Residence:: GERMANY

Street of Mailing Address:: ST. THOMASWEG 2

City of Mailing Address:: KERKEN

State or Province of Mailing Address::

Country of Mailing Address:: GERMANY

Postal or Zip Code of Mailing Address:: D-47647

Applicant Authority Type:: Inventor

Primary Citizenship Country:: THE NETHERLANDS
Status:: Full Capacity

Given Name:: BARTHOLOMEUS ANTONIUS

Middle Name::

Family Name:: SCHEURS
City of Residence:: ROSMALEN

State or Province of

Residence::

Country of Residence:: THE NETHERLANDS

Street of Mailing Address:: ZANDSTRAAT 13

City of Mailing Address:: ROSMALEN

State or Province of Mailing Address::

Country of Mailing Address: THE NETHERLANDS

Postal or Zip Code of Mailing Address:: NL-5242 GR

Applicant Authority Type:: Inventor

Primary Citizenship Country:: THE NETHERLANDS
Status:: Full Capacity

Given Name:: ARNOUT

Middle Name::

Family Name:: ROOS

City of Residence:: 'S-HERTOGENBOSCH

State or Province of

Residence::

Country of Residence:: THE NETHERLANDS

Street of Mailing Address:: VAN DER WEEGHENSINGEL 43

City of Mailing Address:: 'S-HERTOGENBOSCH

State or Province of Mailing Address::

Country of Mailing Address:: THE NETHERLANDS

| Postal or Zip Coc                       | de of Mailing Ado | dress:: NL-5212 F | γJ                 |  |
|---|-------------------|-------------------|--------------------|--|
| Correspondence In                       | nformation        |                   |                    |  |
| Correspondence Cu                       | ıstomer           | 000466            |                    |  |
| Number::                                |                   |                   |                    |  |
|   |                   |                   |                    |  |
| Representative Information              |                   |                   |                    |  |
| Representative Customer                 |                   | 000466            | 000466             |  |
| Number::                                |                   |                   |                    |  |
|   |                   |                   |                    |  |
| Domestic Priorit                        | y Information     |                   | Parent Filing      |  |
| Application::                           | Continuity        | Parent            |                    |  |
|   | Type::            | Application::     | Date::             |  |
|   |                   |                   |                    |  |
|   |                   |                   |                    |  |
|   |                   |                   |                    |  |
|   |                   |                   |                    |  |
| Foreign Priority                        |                   |                   | Dud and but        |  |
| Country::                               | Application       | Filing Date::     | Priority Claimed:: |  |
|   | Number::          |                   |                    |  |
| EUROPE                                  | 02078710.7        | 9/10/02           | Yes                |  |
|   |                   |                   |                    |  |
|   |                   |                   |                    |  |
| Assignment Info                         | rmation           |                   |                    |  |
| Assignee Name::                         |                   |                   |                    |  |
| Street of Maili                         | ng Address::      |                   |                    |  |
|   |                   |                   |                    |  |
| City of Mailing Address::               |                   |                   |                    |  |
|   | nce of Mailing Ad | ddress::          |                    |  |
| Country of Mailing Address::            |                   |                   |                    |  |
| Postal or Zip Code of Mailing Address:: |                   |                   |                    |  |
|   |                   |                   |                    |  |